

Adverse Childhood Experiences (ACEs) and Adult Smoking



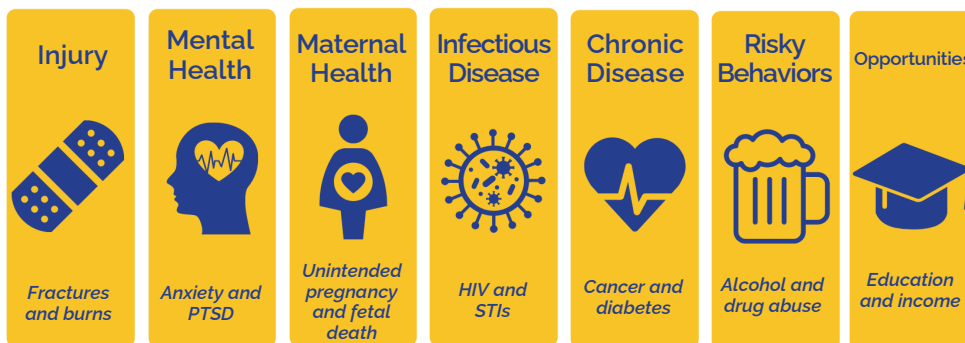
Tobacco Prevention
and Cessation

Adverse Childhood Experiences, or ACEs, are potentially traumatic events that occur in childhood (before the age of 18) such as experiencing violence, abuse, or neglect; witnessing violence; and having a family member attempt or die by suicide. ACEs can have negative, lasting effects on health outcomes including obesity, depression, diabetes, heart disease, cancer, and suicide. ACEs can impact behaviors specifically increasing likelihood of smoking, alcoholism, and drug use, and negatively impact opportunities associated with education attainment and employment.¹

ACEs are categorized into two groups: abuse and household challenges. The abuse category includes emotional, physical, and sexual abuse experiences.² The household challenges category includes intimate partner violence, substance abuse in the household, mental illness in the household, parental separation or divorce, and incarcerated household members experiences.²

Early Adversity has Lasting Impacts

ACEs can have lasting negative effects on health, wellbeing, and opportunity. Half of the top 10 leading causes of death are associated with ACEs including heart disease, cancer, and suicide.⁴ Exposure to 6 or more ACEs is associated with a shorter life expectancy of nearly 20 years.⁵ As the number of ACEs increase so does the risk for negative outcomes.²



ACEs in the United States

Nearly 61% of adults, from 25 states between 2015-2017, surveyed reported that they had experienced at least one ACE.³ Further, about 16% adults surveyed reported that they had experienced four or more types of ACEs.³ Women and racial/ethnic minority groups were more likely to experience four or more ACEs than men and white adults.³

ACEs in Indiana

In 2018, Indiana collected adverse childhood experience (ACE) data for the first time through the Behavioral Risk Factor Surveillance System (BRFSS). More than 61% of Hoosier adults reported experiencing at least one ACE. Hispanic adults were more likely than white adults to experience 4 or more ACEs. Hoosier adults experiencing 4 or more ACEs are more likely to report being unable to work, having more than 14 poor mental health days, and not having health insurance. The BRFSS team at the Indiana Department of Health has written a report which further outlines how ACEs can impact adult Hoosiers' health. The full report is available here: in.gov/isdh/25194.htm

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Fast Facts

Indiana:

- In 2018, **61%** of Hoosier adults reported exposure to at least one ACE.⁶
- In 2018, **37%** of Hoosiers with four or more ACE exposures were current smokers.⁶

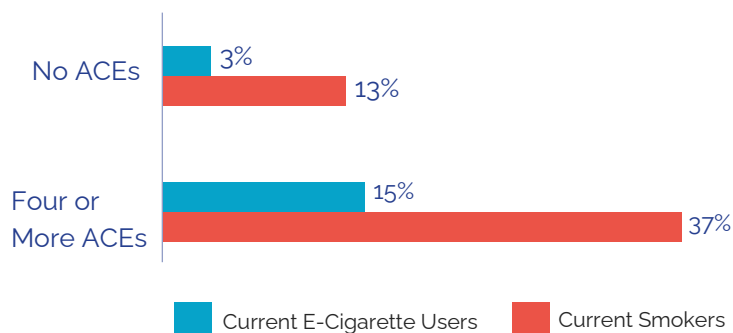
United States:

- Exposure to **6 or more** ACEs is associated with a shorter life expectancy of nearly **20 years**.⁴
- Adults reporting exposure to five or more ACEs were **5 times** as likely to initiate smoking at an early age.⁷
- All ACE categories were associated with an increased risk of early smoking initiation, ever smoking, current smoking, and heavy smoking.⁷

ACEs and Adult Smoking in the United States

Smoking is one behavior associated with adverse childhood experiences (ACEs). Each of the 8 ACE categories is associated with an increased risk of early smoking initiation, ever smoking, current smoking, and heavy smoking.⁷ Individuals who reported exposure to five or more ACEs were 5 times as likely to initiate smoking at an early age and 3 times as likely to smoke heavily.⁷

Indiana adults experiencing 4 or more ACEs are more likely to smoke or use e-cigarettes.



ACEs and Adult Smoking in Indiana⁶

Among Indiana adults, those reporting four or more ACEs were 3 times as likely to currently use cigarettes and nearly 5 times to currently use e-cigarettes.

Among adults who were out of work and experiencing 4 or more ACEs, 42% were also currently smoking. Similarly, among adults with a high school education or less and experiencing 4 or more ACEs, 57% were currently smoking.

Preventing ACEs

Adverse childhood experiences (ACEs) and their health implications can be preventable. Strategies for preventing ACEs and their harms include strengthening economic support for families, teaching skills, and intervening to lessen immediate and long-term harms. Specific skills to be taught should focus on coping, empathy, problem-solving and conflict management. Strategies used to intervene and lessen harms from ACEs could include enhanced primary care which utilizes a screener assessment for ACEs exposure during wellness visits, providing treatment to prevent problem behaviors, and addressing depression, fear and anxiety, post-traumatic stress disorder (PTSD), and other symptoms of distress.¹ Up to 21 million cases of depression could potentially be avoided by preventing ACEs.⁴



Strengthen economic support for families



Promote social norms that protect against violence and adversity



Ensure a strong start for children



Teach skills



Connect youth to caring adults and activities



Intervene to lessen immediate and long-term harms

For additional information on Indiana tobacco prevention and cessation: in.gov/isdh/tpc

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